

EDITED: _____
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VALIDATED: _____
MONITORED: _____

START TIME: _____

CCR# 10-3391

7/23/08

DRAFT #8

1- 2- 3- 4-

Child Care Provider
Telephone Survey
Health Eating Habits Baseline Study for SNAP

Name: _____ Phone # () _____

Interviewer: _____ Date: _____

ASK TO SPEAK TO THE NAME ON THE LIST

If person is not available ask when would be a good time to call back.

Hello, my name is _____ with Creative Consumer Research. We are conducting a market research study and would like to include your opinions. This research is being conducted on behalf of a group of state-level programs funded by the USDA, including WIC, Food Stamps, CACFP, the Agricultural Extension, and others. I want to assure you that we are not selling anything, and your responses will be kept entirely confidential.

A. Can you hear me clearly?

Yes..... 1

No..... 2 (SPEAK LOUDER AND CONTINUE THE SURVEY. IF STILL CANNOT HEAR, OFFER TO CALL BACK LATER AND SCHEDULE A TIME)

- B. In what city do you live? (IF RESPONSE NOT ONE OF THE CITIES LISTED BELOW ASK) What major city are you close to or within a reasonable driving distance? (CHECK QUOTAS)

Abilene	1	McAllen-Brownsville-	
Harlingen	11		
Amarillo	2	Odessa-Midland	12
Austin	3	San Angelo	13
Beaumont-Port Arthur	4	San Antonio	14
Corpus Christi	5	Sherman-Ada	15
Dallas Ft. Worth	6	Texarkana	16
El Paso	7	Tyler-Longview	17
Houston/Galveston	8	Victoria	18
Laredo	9	Waco	19
Lubbock	10	Wichita Falls	20

DO NOT READ Other ()
(IF NOT LOCATED NEAR ONE OF THESE, THANK, TERMINATE AND TALLY___)

- C. Would you prefer to conduct this interview in....?

English..... 1
Spanish..... 2
Other_____ (TERMINATE)

1. Does your organization provide child care for children 10 and under?

Yes..... 1 (CONTINUE)
No..... 2 (TERMINATE)

2. Does your organization or home provide meals for the children in your care?
 Yes (CONTINUE)..... 1
 No (CONTINUE)..... 2

3. Does your organization or home provide snacks for the children in your care?
 Yes (CONTINUE)..... 1
 No (TERMINATE)..... 2

4. Are you the primary person responsible for deciding, purchasing or distributing snack foods to the children in your child care center?
 Yes (CONTINUE)
 No (Ask, "May I please speak to that person now?" If not available, gather call-back information and TERMINATE)

5. What is your role in the organization and/or day care?
 Director..... 1
 Assistant Director..... 2
 Teacher..... 3
 Cook..... 4
 Other (SPECIFY) 5

6. Is your organization considered: (CHECK QUOTAS)
 A licensed/registered home 1 (IF HOME, SKIP TO Q8a)
 A child care center 2 (CONTINUE)

- 7a. How many child-care centers does your company operate?
 One 1 (SKIP TO Q8a)
 Two 2 (IF TWO OR MORE, GO TO 7a)
 Three 3
 Four or More..... 4

- 7b. Are all of the centers your company operates located in the State of Texas?
 Yes..... 1 (SKIP TO Q8a)
 No..... 2 (CONTINUE)

7c. In what other states are your centers located? (MULTIPLE RESPONSES ACCEPTED)

New Mexico..... 1
Oklahoma..... 2
Louisiana 3
Other (SPECIFY)..... 4

8a. How many children do you currently serve at this facility?

Less than 12 1
13-20 2
21-50 3
51-100..... 4
101-150 5
151-200..... 6
Beyond 200 7

8b. Approximately what percentage of the families you serve do you think participate in government programs such as Medicaid, Food Stamps, TANF or WIC? Would you say:

0% 1
1-4%..... 2
5-10% 3
10-25%..... 4
25-50% 5
50-75% 6
75-100%..... 7
(Do not read) Don't know 8

8c. Are one or more of the children in your care your own children?

Yes..... 1
No..... 2

8d. Approximately what percentage of the children you serve are under age 5?

0% 1
1-4%..... 2
5-10% 3
10-25%..... 4
25-50% 5
50-75% 6
75-100%..... 7
Don't know(DO NOT READ) 8

8e. Does your child care center serve children under age 1?

Yes..... 1 (CONTINUE)
No..... 2 (SKIP TO Q9)

8f. What percentage of your infants receive infant formula from the childcare center?

0% 1
1-4%..... 2
5-10% 3
10-25%..... 4
25-50% 5
50-75% 6
75-100%..... 7
(Do not read) Don't know 8

8g. Do any moms at your facility bring breast milk for their infants?

Yes..... 1 (CONTINUE)
No..... 2 (SKIP TO Q9)

8h. Approximately what percentage of moms who have infants bring breast milk for their infants?

1-4%..... 1
5-10% 2
10-25%..... 3
25-50% 4
50-75% 5
75-100%..... 6
Don't know (DO NOT READ) 7

9. Not including snacks, what do you serve per day? Would you say:

Lunch only 1
Breakfast and Lunch 2
Lunch and Dinner/Supper (the Evening Meal) 3

All three meals, Breakfast, Lunch and Dinner..... 4
 None..... 5

10. How often do you serve snacks per day? (SINGLE RESPONSE)

Afternoon snack only 1
 Morning and afternoon snack..... 2
 Morning, afternoon and evening snacks 3
 Other (DESCRIBE)..... 4

11. Which of the following best describes who prepares meals and snacks:

I prepare all the meals myself.....1
 I prepare meals with the help of another person.....2
 I have a part time cook.....3
 I have a full-time cook.....4
 Our operation has/operations have more
 than one full-time cook5
 Other (please describe).....6

12. Which of the following best describes the way meals and snacks are prepared at your facility:

I prepare meals at home to serve at my
 Licensed/registered home.....1 (SKIP TO Q14)
 I prepare meals at home to serve at my center,
 which is located elsewhere2 (SKIP TO Q14)
 We prepare meals at the center primarily
 using a microwave or warming oven.....3 (ASK Q13a)
 We have a fully operational commercial kitchen.....4 (SKIP TO Q14)
 Other (SPECIFY).....5 (SKIP TO Q14)

(IF MIRCROWAVE OR WARMING ONLY IN Q12, ASK)

13a. Do you have the option to prepare meals on a stovetop?

Yes 1(CONTINUE)
 No 2(SKIP TO Q14)

13b. What are the reasons you do not use a stovetop? (MARK ALL THAT APPLY)

Local fire codes prohibit stovetop preparation without vent-hoods.....	1
We cannot afford to retrofit our kitchen to meet fire code standards	2
Health department regulations are difficult to comply with in a center our size	3
We do not have enough staff/time to prepare stovetop meals	4
It is just easier to microwave packaged frozen foods.....	5
It is cheaper to purchase microwave foods	6
We do not have enough storage for everything we need to prepare fresh meals	7
The children like microwave foods better.....	8
Other (DESCRIBE)	9

14. How often does someone go grocery shopping for foods to serve at your registered home or center? Would you say:

More than once per week.....	5
Once per week.....	4
Once every 10 days to two weeks.....	3
Twice a month.....	2
Monthly.....	1
A wholesaler or supplier delivers our food.....	X
Other (SPECIFY)	Y

15. Now I would like for you to think about the types of foods you serve to the children under age 10 at your child care center **DURING SNACK TIME ONLY**. How many times during the past week did the children under 10 eat:

Item	0	1	2	3	4	5	6	7	Don't Know	Refused
Apples, Applesauce, or Pears	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bananas and Plantains	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cantaloupe	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Watermelon	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Grapes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Oranges (e.g., clementines, tangerines, mandarins, navels)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Peaches or apricots	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pineapple	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mango	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kiwi	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Papaya	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lemons or limes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Berries	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dried fruit, raisins, or prunes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fruit cocktail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Broccoli	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Carrots	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cauliflower	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tomatoes, tomato sauce, or salsa	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cucumbers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jicama	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lettuce or salad greens	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Spinach or other dark greens	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
French fries, fried potatoes, tater tots, home fries, or hash browns	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Avocado	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

16. When shopping for vegetables and fruits for your childcare facility, how likely are you to purchase fruits and vegetables in the following ways? Would you say you are very likely, somewhat likely, somewhat unlikely or very unlikely to purchase...? (READ EACH ONE AT A TIME) (READ LIST)

	<u>VERY LIKELY</u>	<u>SOMEWHAT LIKELY</u>	<u>SOMEWHAT UNLIKELY</u>	<u>VERY UNLIKELY</u>	<u>DEPENDS ON THE SEASON</u>
Canned	5	4	3	2	1
Frozen	5	4	3	2	1
Fresh	5	4	3	2	1
Dried	5	4	3	2	1

17. How often are whole grain products, such as oatmeal, brown rice, 100% whole wheat bread, 100% whole-wheat tortillas or corn tortillas, included in the meals you prepare for your childcare facility? Would you say:

Multiple times per day.....	5
Daily	4
A few times per week	3
A few times per month.....	2
Rarely.....	1
Never.....	X
DK/Refused (DO NOT READ).....	Y

18. What kind of bread do you usually purchase for your facility? (DO NOT READ LIST, ACCEPT MULTIPLE RESPONSES)

White bread.....	1
Whole wheat bread.....	2
Whitewheat bread such as	
Iron Kids and Bimbo.....	3
Multi-grain.....	4
Oatmeal.....	5
Rye.....	6
Pumpernickel.....	7
Other (SPECIFY) _____	8

20. When you prepare snacks for your children in your childcare, would you say that fruits and vegetables are...? (READ LIST)

Always part of the snack..... 4 (SKIP TO Q22)
Sometimes part of the snack..... 3
Rarely part of the snack..... 2
Never part of the snack..... 1

21. When thinking about the amount of fruits and vegetable you serve to the children in your child care center, what would you say the reasons are that you do not offer more? (DO NOT READ, ACCEPT MULTIPLE ANSWERS)

Too Expensive 1
Not enough storage..... 2
Fruits & vegetables don't keep/we only shop or
take delivery once per week..... 3
Don't order because the quality is unpredictable..... 4
I order/buy them in season but not out 5
Too much chopping/preparation 6
Not filling enough for the children..... 7
Not sure how to tell if the quality is good 8
Not sure how to select 9
Children don't like them/too much waste 10
Take too much time/staff to prepare and cook..... 11
Not enough variety 12
Children don't like the taste 13
Don't have them available, lack of access 14
They are messy 15
Many children have food allergies 16
Concerned about safety: salmonella, pesticides, etc. 17
I believe I serve enough now 18
The quality is not good at my grocery store 19
I like to offer a variety of snacks 20
Other (specify) 21
Don't know X
Refused (DO NOT READ)

22. In your opinion, do you think the children get the right amount of fruits *and* vegetables at child care now, or do you think they should eat more?
- Eat right amount 1
 Should eat more..... 2
 Don't know/not sure..... 3
 Refused 4
 Other (SPECIFY)..... 5
23. Other than infant formula or breast milk, how often do you serve milk to children at your child care center?
- With every meal..... 4
 At least once per day..... 3
 A few times per week..... 2
 Weekly..... 1
 Don't know..... X
 Refused..... Y
24. What kind of milk do you usually serve to children over age 2? (ALLOW MULTIPLE RESPONSES)
- Skim/fat free..... 1
 1%/low fat..... 2
 2%/reduced fat..... 3
 Whole milk..... 4
 Soy milk..... 5
 Other (specify)..... 6
 Don't know..... 7
 Refused..... 8
- 25a. How often do you serve drinks like Kool-Ade, Gatorade, Sunny Delight, or other fruit drinks or punch? Would you say:
- Daily..... 6
 A few times per week..... 5
 Weekly..... 4
 A few times per month..... 3
 Monthly 2
 Never..... 1
 Don't know..... X
 Refused..... Y
- 25b. How often do you serve 100% fruit juice? Would you say:
- Daily..... 6

A few times per week.....	5
Weekly.....	4
A few times per month.....	3
Monthly	2
Never.....	1
Don't know.....	X
Refused.....	Y

26. I am going to read some statements to you. Please tell me how true you think each statements is. Do you feel the statement is very true, somewhat true, neither true nor untrue, somewhat untrue or very untrue.

	Very True	Somewhat True	Neither True nor Untrue	Somewhat Untrue	Very Untrue
Children often come to school with fast food breakfasts from places like McDonalds					
Many children are hungry when they arrive in the morning					
Child care providers like me spend more time with kids than their parents and probably know what foods they like and dislike better					
Parents are often surprised to hear their children eat certain foods at child care because they think they do not like those foods					
In the evenings, parents often wait outside until their children finish their evening meal rather than take them home for dinner					
Children need to eat more at child care on Fridays and Mondays because they probably do not get enough of the right foods at home over the weekend					
Parents often send their children to child care with junk food or sweets					
Many children eat their only real meals at child care centers like mine					
	Very True	Somewhat True	Neither True nor Untrue	Somewhat Untrue	Very Untrue
Most parents do not introduce fruits and vegetables to their children					
Most families today do not eat dinner together					
The CACFP does not pay enough to cover snacks and I spend more than I receive from them to offer healthy snacks					
Most parents today do not know how to properly feed their children					
At our center we monitor what the children like for snack foods, and take that into consideration when menu-planning					
We have regular lessons for our pre-schoolers about healthy eating, e.g. food pyramids, colors or foods, etc.					
We have many lessons, toys and activities to guide our teaching about healthy eating					

27. How often do the children at your child care center watch TV or DVDs while they are at the center? Would you say:
- | | |
|----------------------------|---|
| Daily..... | 6 |
| A few times per week..... | 5 |
| Weekly..... | 4 |
| A few times per month..... | 3 |
| Monthly | 2 |
| Never..... | 1 |
| Don't know..... | X |
| Refused..... | Y |
28. How often do the children at your child care center get at least 60 minutes of physical activity during the day? Would you say:
- | | |
|----------------------------|---|
| Daily..... | 6 |
| A few times per week..... | 5 |
| Weekly..... | 4 |
| A few times per month..... | 3 |
| Monthly | 2 |
| Never..... | 1 |
| Don't know..... | X |
| Refused..... | Y |
29. The CACFP Program and the Texas WIC program recently sent out 2 DVDs a children's book and a magnet titled The Adventures of Zobey. Did your child care center receive the Zobey materials?
- | | |
|--------------------------|------------------|
| Yes..... | 1 |
| No..... | 2 (SKIP TO Q33a) |
| Don't know/not sure..... | 3 (SKIP TO Q33a) |
30. Have you used the Zobey materials with children at your center?
- | | |
|--|--------------|
| Yes..... | 1 (CONTINUE) |
| No..... | 2 |
| Not yet, but we plan to use them in the future. | 3 |
| Not sure..... | 4 |
- } (SKIP TO Q32)

31a. How useful did you find the Zobey materials at helping to encourage your children to be physically active? Would you say...?

Very useful..... 5
Somewhat Useful..... 4
Neutral 3
Not useful..... 2
Not at all useful 1

31b. How useful did you find the Zobey materials to encourage healthy eating habits? Would you say...?

Very useful..... 5
Somewhat Useful..... 4
Neutral 3
Not useful..... 2
Not at all useful 1

} (SKIP TO 33b)

32. Why haven't you used the Zobey materials at your child care center?

Don't have room for the kids to dance while they watch the DVD 1
Doesn't fit with our curriculum 2
We don't watch TV at the child care center 3
I watched it and didn't think the kids would like it. 4
Couldn't find the lesson plans online to use with the materials 5
Other (SPECIFY)..... 6

33a. Would you like to receive materials like the Zobey DVDs, children's books or magnets from WIC or the CACFP program in the future?

Yes..... 1
No..... 2
Don't know/not sure..... 3

(SKIP TO Q34)

- 33b. Would you like to receive additional materials like the Zobey DVDs, children's books or magnets from WIC or the CACFP program in the future?

Yes..... 1
 No..... 2
 Don't know/not sure..... 3

34. Which of the following best describes the way your pre-schoolers eat?

They eat together with me at a kitchen table in my home..... 1
 They eat on the floor in front of a television set in my home 2
 They eat family style with their teachers, in their classrooms 3
 They eat cafeteria style, like at school..... 4
 Other (SPECIFY)..... 5

35. How helpful would each of the following things be to help you get your preschoolers to eat more fruits and vegetables? Would you say it would be very helpful, somewhat helpful, not very helpful, or not at all helpful? How helpful would (____) be in getting the children to eat more fruits and vegetables?

	VERY HELPFUL	SOMEWHAT HELPFUL	NOT VERY HELPFUL	NOT AT ALL HELPFUL
a. Recipes	4	3	2	1
b. Lesson plans	4	3	2	1
c. (stated below) More training for our cooks	4	3	2	1
d. More information about the nutritional value of fruits and vegetables	4	3	2	1
e. Information on storage of fruits and vegetables	4	3	2	1
f. DVDs, videos, or books for children showing healthy foods, including fruits and vegetables	4	3	2	1
g. Cheaper products	4	3	2	1
h. Ideas for educating young children	4	3	2	1
i. A newsletter via the Internet	4	3	2	1
j. An Internet site with recipes	4	3	2	1
k. Other (SPECIFY).....	4	3	2	1

36. Have you ever partnered with any of the following programs to receive nutrition education materials for parents or your staff?

	<u>YES</u>	<u>NO</u>
WIC program	1	2
Texas A&M Extension or Texas AgriLife Extension	1	2
Food Bank or Food Pantry	1	2
CACFP staff	1	2
Other (SPECIFY)	1	2

37. Have you ever partnered with any of the following programs to provide eligibility information for parents or your staff?

	<u>YES</u>	<u>NO</u>
WIC program	1	2
Medicaid, Food Stamps or TANF	1	2
Food Bank or Food Pantry	1	2
Other (SPECIFY)	1	2

38. Currently the Child and Adult Care Food Program specifies that snacks must include two of the four food groups. What would be your reaction to a change of policy which said that EVERY SNACK must include AT LEAST ONE FRUIT OR VEGETABLE? (DO NOT READ LIST, ACCEPT MULTIPLE RESPONSES)

We would simply serve more juice.....	1
We could not afford it.....	2
I think it would be positive/good for the children.....	3
We would need more ideas for snacks.....	4
We would waste even more food.....	5
My cook would quit/go crazy.....	6
Other (SPECIFY)	7

39. Of the following potential concerns associated with this policy change, how likely is it that you would face the following? (Very likely, somewhat likely, neutral, somewhat unlikely, or very unlikely)

	<u>Likely</u>	<u>Very Likely</u>	<u>Somewhat Neutral</u>	<u>Somewhat Unlikely</u>	<u>very Unlikely</u>	
a. We would not have enough money for snacks	1	2	3	4	5	
b. We would not have enough storage	1	2	3	4	5	
c. We do not have the proper facility to serve these types of snacks		1	2	3	4	5
d. Our children would be hungrier		1	2	3	4	5
e. Our cook would need additional training	1	2	3	4	5	
f. I would have to take delivery more often from my suppliers		1	2	3	4	5
g. I would have to pay the cook more because it would take them more time	1	2	3	4	5	
h. More food would go to waste	1	2	3	4	5	

40. If this policy change went into effect, how long would it take you to adjust your snack menus to the change? (DO NOT READ LIST)

Right away..... 1
 Within a week or two..... 2
 Within a month..... 3
 Months..... 4
 Other comments (SPECIFY)..... 5

- 41a. Currently, the Texas Department of Agriculture offers training on the set-up of a qualifying program for CACFP. What additional training would you like to have? (DO NOT READ LIST) ACCEPT MULTIPLE RESPONSES.

(FOR ALL NOT LISTED IN Q41a ASK)

- 41b. Would you like to have additional training in : (READ LIST)

	<u>41A Unaided</u>	<u>41b Aided</u>
Training on kitchen math targeted for our cooks	1	1
Training on child nutritional needs	2	2
Recipes and menu suggestions	3	3
Children's activities or lesson plans	4	4
Toys or learning tools for kids	5	5
A conference offering displays and cooking demonstrations.....	6	6
One-on-one technical assistance at our center.....	7	7
Opportunities to meet with other child care providers to discuss nutritional issues	8	8

42. Which of the following best describes your age? Would it be...?

18- 24..... 1
 25 - 34..... 2
 35 - 44..... 3

45 – 54..... 4
 55-60 5
 Over 60..... 6
 Refused (DO NOT READ) X

43. What is the highest level of education that you have completed?
 Is it...? (READ LIST)

Less than High School..... 1
 High School Graduate/GED 2
 Some University, Technical
 College, Trade School,
 Beauty School or College/
 Vocational School..... 3
 University Graduate 4
 Attended Graduate School..... 5
 Completed Graduate School 6
 Refused (DO NOT READ) X

44. Where do you have access to the Internet, if at all? Would it be...?
 (READ LIST AND CHECK ALL THAT APPLY)

Home 1
 School..... 2
 Work at the center..... 3
 Family or Friends House..... 4
 Community Library 5
 I don't have access to Internet 6
 Other (Specify)_____ 7

45. Are you the owner of this Center?

Yes..... 1
 No..... 2

46. Does this Center use a contractor to file paperwork?

Yes..... 1

No..... 2

THAT CONCLUDES OUR SURVEY. THANK YOU VERY MUCH FOR YOUR PARTICIPATION.

(CONFIRM RESPONDENT NAME, AREA CODE AND TELEPHONE NUMBER)

END TIME:_____

EDITED: _____
EDITED PICK-UPS: _____
VALIDATED: _____
MONITORED: _____

START TIME: _____

CCR# 10-3349

7/21/08 _____

DRAFT #11

1- 2- 3- 4-

PARENT PHONE SURVEY GUIDE
HEALTHY EATING HABITS BASELINE STUDY FOR SNAP

NAME: _____ PHONE #: (____) _____ 5-

INTERVIEWER: _____ DATE: _____ 6-

ASK TO SPEAK TO MALE OR FEMALE HEAD OF HOUSEHOLD.

Hello, my name is _____ with Creative Consumer Research. Today we are calling on behalf of the State of Texas to conduct a market research study regarding grocery shopping and children's eating habits. We are not selling anything and would like to include your opinions. Your responses will be combined with the answers from other people across the state. Your opinions are very important to us and the information we gather will help the quality of life for all Texans.

A. Can you hear me clearly?

Yes1

No2

(SPEAK LOUDER AND CONTINUE WITH SURVEY.
IF STILL CANNOT HEAR, OFFER TO CALL BACK
LATER AND SCHEDULE A TIME _____.)

1. In what city do you live? (IF RESPONSE NOT ONE OF THE CITIES LISTED BELOW ASK)
What major city are you close to or within a reasonable driving distance? (CHECK QUOTAS)

Abilene	1	McAllen-Brownsville-Harlingen	11
Amarillo	2	Odessa-Midland	12
Austin	3	San Angelo	13
Beaumont-Port Arthur	4	San Antonio	14
Corpus Christi	5	Sherman-Ada	15
Dallas Ft. Worth	6	Texarkana	16
El Paso	7	Tyler-Longview	17
Houston/Galveston	8	Victoria	18
Laredo	9	Waco	19
Lubbock	10	Wichita Falls	20

DO NOT READ Other ()

(IF NOT LOCATED NEAR ONE OF THESE, THANK, TERMINATE AND TALLY____)

2a. Would you prefer to conduct this interview in...?

English1
Spanish2

CHECK QUOTAS

2b. Which of the following best describes your race? (READ LIST)

White/Caucasian.....	1	} CHECK QUOTAS
African American/Black	2	
Pacific Islander.....	3	
Hispanic/Latino.....	4	
Native American	5	
Asian	6	
(IF ASIAN, ASK TO SPECIFY THEIR COUNTRY OF ORIGIN_____)		
Other (SPECIFY).....	7	
Refused (DO NOT READ).....	8	

2c. Do you consider yourself to be of Hispanic/Latino descent?

Yes.....1 → ASK 2d
No.....2 → SKIP TO Q3

2d. How long have you been in the United States?

Less than 1 year1
1-3 years2
3-5 years.....3
5-10 years.....4
More than 10 years5

3. First, are you the...?

Male head of household.....1
Female head of household2

4. Have you or has any member of your family ever worked in any of the following industries? (READ LIST)

Market research	()	} THANK, TERMINATE & TALLY ____
Advertising.....	()	
Media (Television, Radio, Newspaper, etc.).....	()	
None.....	()	

CONTINUE

(IF RESPONSE IN Q5 IS '4', THANK, TERMINATE & TALLY __; IF RESPONSE IS '2 OR 3' BUT NOT '1', THANK, TERMINATE & TALLY __)

5. Which of the following ages best describes the children in your household?

10 and under.....1
 11 – 14 yrs.....2
 15 – 17 yrs.....3
 No children in the home.....4

6. What are the specific ages of your child/children under the age 10? (ACCEPT MULTIPLE RESPONSES)

Less than 12 months.....1	(IF RESPONSE IS ONLY '1' IN Q6, THANK, TERMINATE & TALLY __)
1-2 yrs2	
3-4 yrs.....3	
4-5 yrs.....4	
5-6 yrs.....5	
6-7 yrs6	
7-8 yrs7	
8-9 yrs.....8	
9-10 yrs.....9	

7. Who makes most of the decisions about what the children eat?

Self.....1	(CONTINUE)
Both Parents2	(CONTINUE)
Child's other parent/guardian.....3	(ASK TO SPEAK TO THIS PERSON, REINTRODUCE THE PURPOSE OF THE STUDY AND CONTINUE WITH QUESTIONS. IF PERSON NOT AVAILABLE, SET A CALL BACK DATE AND TIME) DATE:_____ TIME:_____
Other _____.....4 (SPECIFY)	(THANK, TERMINATE, & TALLY __)

8. Including yourself, how many family members are living in your household?

One1 THANK, TERMINATE & TALLY___
 Two2
 Three.....3
 Four.....4
 Five5
 Six6
 Seven or more7

9a. For your family of (REFER TO Q8) is your total household income before taxes above or below (INSERT AMOUNT) per month?
 (CHECK CHART BELOW AND CORRELATE WITH EARNINGS)

Q8 # OF PERSONS IN FAMILY	Q9aMUST EARN BELOWTHE FOLLOWING PER MONTH	ABOVE	BELOW
. 2	\$2,159		
. 3	\$2,714		
. 4	\$3,269		
. 5	\$4,379		
. 6	\$4,934		
. 7	\$5,489		

THE FAMILY MUST BE
AT OR BELOW THE
INCOME LISTED TO
QUALIFY FOR GROUP 1

(IF RESPONDENT QUALIFIES FOR GROUP 1, SKIP TO Q10. IF RESPONDENT'S INCOME IS ABOVE CONTINUE TO Q9b, AND IF HOUSEHOLD INCOME IS \$45,001 OR MORE QUALIFIES FOR GROUP 2. ALL OTHERS TERMINATE.)

9b. Which of the following categories best describes your annual household income for 2007?
 Would it be...? (READ LIST)

Under \$25,0001
 \$25,000 – 34,9992
 \$35,000 – 44,9993
 \$45,000 – 54,9994
 \$55,000 – 64,9995
 \$65,000 – 74,9996
 \$75,000 +7

THANK, TERMINATE & TALLY___

CONTINUE, COUNT TOWARD QUOTA GROUP 2

10. Do you work outside the home?

- Yes, full-time.....1
Yes, part-time.....2
No, I am a full-time
stay-at-home mom/parent.....4
Retired5
Temporarily unemployed6
Refused (DO NOT READ).....7
- } SKIP TO Q12

11. You stated that you work outside the home. Who cares for your child/children when they are not in public school? (READ LIST)

- Child/Children go to a child care center..... 1
Child/Children go to someone's home 2
Child/Children stay with a family member 3
Child/Children attend after school and summer programs only4
Other (SPECIFY)..... 5

For this next series of questions, I would like for you to think about your family's eating habits.

12. Does/Do your child/children attend school and/or child care during the school year?

- Yes1
No2 SKIP TO Q14

13. How often does your child/children purchase or receive free or reduced lunch at school or daycare?

- Daily5
A few times per week4
A few times per month3
Rarely2
Never1

14. During a normal week, how often would you say your family sits down to a meal together at home? Would you say... (READ LIST)

- Daily or almost every day5
Two to three times per week4
Once a week.....3
Rarely2
Never1

15. How often does your family watch television while eating a meal? Would you say: (READ LIST)

Never1
Rarely2
Sometimes3
Often.....4
Always.....5

I would now like to ask some questions about the kinds of food your child/children eat(s). Knowing that different children have different tastes, think only of your OLDEST CHILD AGE TEN OR YOUNGER when answering the following questions.

- 16a. Does he/she eat more than ONE kind of fruit per day? Would you say:

Always	Sometimes	Never	Don't know	Refused
3	2	1	x	y

(IF 'ALWAYS' OR 'SOMETIMES' IN Q16a, ASK Q16b. OTHERWISE SKIP TO Q16c.)

- 16b. How many servings of **fruit** does he/she eat per day?

_____ (NO RANGES. IF UNSURE, ASK FOR BEST ESTIMATE.)

- 16c. Does he/she eat more than one kind of vegetable per day? Would you say:

Always	Sometimes	Never	Don't know	Refused
3	2	1	x	y

(IF 'ALWAYS' OR 'SOMETIMES' IN Q16c, ASK Q16d. OTHERWISE SKIP TO 17a.)

- 16d. How many servings of **vegetables** does he/she eat per day? (open-ended)

_____ (NO RANGES. IF UNSURE, ASK FOR BEST ESTIMATE.)

- 17a. When you prepare meals for your child, would you say that fruits and vegetables are...? (READ LIST)

Always part of the meal.....4
Sometimes part of the meal.....3
Rarely part of the meal.....2
Never part of the meal.....1

17b. When you prepare snacks for your child, would you say that fruits and vegetables are...?
(READ LIST)

Always part of the snack.....4
 Sometimes part of the snack3
 Rarely part of the snack2
 Never part of the snack1

18a. Again, thinking of your oldest child age 10 or younger, how often does he/she drink 100% fruit juice? Would you say...

Multiple times per day.....6
 Daily.....5
 A few times per week.....4
 A few times per month.....3
 Rarely.....2
 Never.....1
 DK/Refused (DO NOT READ).....x

18b. Again, still thinking of your oldest child age 10 or younger, what kind of milk does he/she usually drink? Does your child drink... (READ LIST)

	<u>Yes</u>
Skim/fat free	1
1%/low fat	2
2%/reduced fat	3
Whole milk	4
Soy milk	5
Child doesn't drink milk	6
Don't know (DO NOT READ)	7
Refused (DO NOT READ)	8

18c. How often does he/she drink soft drinks, soda, kool-aid, Gatorade, Sunny Delight or other fruit drinks or punches?

Multiple times per day.....6
 Daily.....5
 A few times per week.....4
 A few times per month.....3
 Rarely.....2
 Never.....1
 DK/Refused (DO NOT READ).....x

19a. Do **you** eat more than ONE kind of fruit per day. Would you say:

Always	Sometimes	Never	Don't know	Refused
1	2	3	4	5

(IF 'ALWAYS' OR 'SOMETIMES' IN Q19a, ASK Q19b. OTHERWISE SKIP TO Q19c.)

19b. How many servings of **fruit** do **you** eat per day?

_____ (NO RANGES. IF UNSURE, ASK FOR BEST ESTIMATE.)

19c. Do **you** eat more than one kind of vegetable per day? Would you say:

Always	Sometimes	Never	Don't know	Refused
1	2	3	4	5

(IF 'ALWAYS' OR 'SOMETIMES' IN Q19c, ASK Q19d. OTHERWISE SKIP TO Q19e)

19d. How many servings of **vegetables** do **you** eat per day? (open-ended)

_____ (NO RANGES. IF UNSURE, ASK FOR BEST ESTIMATE.)

19e. What kind of milk do **you** usually drink? Would you say: (READ LIST)

Skim/fat free	1
1%/low fat	2
2%/reduced fat	3
Whole milk	4
Soy milk	5
I don't drink milk.	6
Don't know (DO NOT READ)	7
Refused (DO NOT READ)	8

19f. How often do **you** drink 100% fruit juice? Would you say:

Multiple times per day.....	6
Daily.....	5
A few times per week.....	4
A few times per month.....	3
Rarely.....	2
Never.....	1
DK/Refused (DO NOT READ).....	x

19g. How often do you drink soft drinks, soda, kool-aid, Gatorade, Sunny Delight or other fruits drinks or punches?

Multiple times per day.....6
Daily.....5
A few times per week.....4
A few times per month.....3
Rarely.....2
Never.....1
DK/Refused (DO NOT READ).....x

20a. How often do you include whole grains such as oatmeal, brown rice, 100% whole wheat bread, 100% whole wheat tortillas or corn tortillas in your meals? Would you say: (READ LIST)

Multiple times per day.....6
Daily.....5
A few times per week.....4
A few times per month.....3
Rarely.....2
Never.....1
DK/Refused (DO NOT READ).....x

20b. What kind of bread do you usually purchase? (Choose only one)

White bread.....1
Whole wheat bread.....2
Multi-grain.....3
Oatmeal.....4
Rye.....5
Pumpernickel.....6
Other (Specify: _____).....7

21a. What is the main reason your family doesn't eat more fruits and vegetables? (DO NOT READ LIST. ACCEPT ONE RESPONSE.)

21b. Now I would like to read you a list of reasons some parents have given for why their families do not eat more fruits and vegetables. As I read each reason please tell me if you agree or disagree that this is a reason your family does not eat more fruits and/or vegetables. (READ LIST)

		<u>21a</u> <u>UNAIDED</u> <u>REASON</u>	<u>21b</u> <u>AIDED</u> <u>REASON</u>
Too expensive	1	1	
Not sure how to tell if the quality is good/Not sure how to select.....	2	2	
Other people in the family don't like them	3	3	
Take too much time to prepare and cook		4	4
Lots of fruits and vegetables that I'm not sure how to prepare	5	5	
Some family members don't like the taste	6	6	
Not in habit/don't think about it/not used to eating them		7	7
Don't know how to prepare them		8	8
They are not available at work such as in cafeteria, vending machines, food trucks or nearby restaurants	9	9	
They are not available at restaurants		10	10
They are not available in my neighborhood	11	11	
They are messy		12	12
Concerned about safety: pesticides, genetically engineered food		13	13
I believe I eat enough now	14	14	
The quality is not good at my grocery store	15	15	
It is not available from the food pantry or food bank	16	16	

22. Do you agree or disagree with the following statement. It is convenient for you to get good quality fruits and vegetables at stores or markets in your neighborhood.

Agree.....1
Disagree.....2
Don't know.....3
Refused.....4

23. Now I would like for you to think about where you purchase your fruits and vegetables. How often do you purchase fruits and vegetables at a ____? Would you say a few times a week, once a week, a few times per month, once a month, rarely, or never?

	A few times a week	Once a week	A few times per month	Once a month	Rarely	Never
a. Grocery store (includes Wal-Mart).....	1	2	3	4	5	6
b. Farmer's market (a place where multiple farmers bring their produce and sell at one location)	1	2	3	4	5	6
c. Other (SPECIFY).....	1	2	3	4	5	6

24. How important is it to you to purchase fruits and vegetables that are grown _____?
Would you say it's very important, somewhat important, neither important nor unimportant, somewhat unimportant, or not at all important?

	VERY IMPORTANT	SOMEWHAT IMPORTANT	NEITHER IMPORTANT NOR UNIMPORTANT	SOMEWHAT UNIMPORTANT	IMPORTANT AT ALL	NOT
a. In the United States		1	2	3	4	5
b. In Texas		1	2	3	4	5
c. Locally meaning in the specific area around your town		1	2	3	4	5

25. Thinking about fruits and vegetables, how sure are you that (ROTATE Q25a – Q25d)?
Would you say you don't feel sure, feel a little sure, feel fairly sure or feel very sure?

	I DON'T FEEL SURE	I FEEL A LITTLE SURE	I FEEL FAIRLY SURE	I FEEL VERY SURE	DK	REFUSED
a. You can make vegetables in ways that your child/children will like?	1		2	3	4	x y
b. Your child/children will <u>eat</u> the vegetables you serve?	1		2	3	4	x y
c. You can buy more fresh fruit in place of chips, crackers, candy and cookies?	1		2	3	4	x y
d. You can get fruit or vegetables for your child/children instead of french fries when you dine out?	1		2	3	4	x y

- 26a. Are you aware of any advertisements about...

	<u>Yes</u>	<u>No</u>
Increasing fruits and vegetables	1	2
Increasing whole grains	1	2
Drinking reduced fat or low fat milk	1	2
Drinking less sugar sweetened beverages	1	2
(IF NO TO ALL SKIP TO Q27a)		

- 26b. If yes, Where did you hear or see the message? (PROBE FOR location)

TV	1
Billboard	2
Radio	3
Magazine	4
Newspaper	5
Internet	6
Other (specify) _____	7

27a. At the grocery store have you seen any banners, posters, pamphlets or special recipes about ?

	<u>Yes</u>	<u>No</u>
Increasing fruits and vegetables	1	2
Increasing whole grains	1	2
Drinking reduced fat or low fat milk	1	2

27b. How often do you read recipes or pamphlets from the grocery store or take them home with you? Would you say...(READ LIST)

Often.....4
 Sometimes3
 Rarely2
 Never1
 Don't know/not sure (DO NOT READ)x
 Refused (DO NOT READ).....y

28. How helpful would each of the following things be to help you eat more fruits and vegetables? Would you say it would be very helpful, somewhat helpful, neither helpful nor unhelpful, not very helpful, or not at all helpful? (ROTATE STATEMENTS)

	Very <u>Helpful</u>	Somewhat <u>Helpful</u>	Not Very <u>Helpful</u>	Not at all helpful
Recipes	4	3	2	1
Information on storage of fruits and vegetables	4	3	2	1
DVDs, videos, or books for children	4	3	2	1
Television advertisements for adults	4	3	2	1
Television advertisements for kids	4	3	2	1
An Internet site with recipes	4	3	2	1
Radio advertisements	4	3	2	1
Billboards	4	3	2	1
Signs at the grocery store	4	3	2	1

Now, I would like to ask a few questions about your community.?

	<u>Yes</u>	<u>No</u>
29a. Do you use walking trails, parks, playground or sports fields in your community for physical activity?	1	2
29b. Do you use any public recreation centers in your community for physical activity?	1	2
29c. Do you use any private or membership-only recreation facilities for physical activity?	1	2
29d. Do you use schools that are open in your community for public recreation activities?	1	2

30a. Overall, how would you rate your neighborhood as a place to walk? Would you say your neighborhood is a (READ LIST) place to walk?

Very pleasant.....5
Somewhat pleasant.....4
Neutral.....3
Not very pleasant.....2
Not at all pleasant.....1

30b. For walking at night, would you describe the street lighting in your neighborhoods as...

Excellent..... 4
Good..... 3
Fair..... 2
Poor....., 1

30c. Does your neighborhood have sidewalks?

Yes..... 1
No..... 2

30d. How safe from crime do you consider your neighborhood to be?

Very safe..... 5
Somewhat safe..... 4
Neutral..... 3
Somewhat unsafe..... 2
Very unsafe..... 1

30e. Generally speaking, would you say most people in your neighborhood can be trusted?

Yes..... 1
No..... 2

These last questions are for classification purposes only.

31. Are you or your child/children currently participating in any of the following programs?
(CIRCLE ALL THAT APPLY)

WIC (Special Supplemental Nutrition Program for Women,
Infants and Children) 1
Food Stamps 2
Medicaid 3
TANF (Temporary Aid to Needy Families) 4
Head Start 5
Other (specify) _____

32a. During the last year, have you visited a food bank or food pantry?

Yes 1
No 2 - SKIP TO Q33

32b. If yes, were fruits and vegetables available from the food bank you visited?

Yes 1
No 2

33. Which of the following best describes your age? Would it be...? (READ LIST)

Under 181
18-24.....2
25-34.....3
35-44.....4
45-54.....5
55-60.....6
Over 60.....7
Refused (DO NOT READ).....x

34. What is your current marital status? Are you...? (READ LIST)

Married1
Single, never married2
Cohabiting/living together3
Divorced/separated4
Widowed5
Refused (DO NOT READ).....X

35. What is the highest level of education that you completed? Is it...? (READ LIST)

1st - 6th grade.....1
6th - 9th grade.....2
10th -12th grade.....3
High school grad/GED.....4
Some university, technical college,
trade school or beauty school
college/vocational school.....5
University graduate 6
Attended graduate school.....7
Completed graduate school.....8
Refused (DO NOT READ).....X

36. Where do you have access to the Internet, if at all? Would it be at...? (READ LIST AND CHECK ALL THAT APPLY)

Home1
School.....2
Work3
Family or friend's house4
Community library.....5
I don't have access to the Internet.....6
Other (SPECIFY)_____7

(CONFIRM RESPONDENT NAME,
AREA CODE AND TELEPHONE NUMBER;
RECORD ON FRONT PAGE OF SURVEY.)

THAT CONCLUDES OUR SURVEY.
THANK YOU VERY MUCH FOR YOUR PARTICIPATION!

END TIME: _____

CHILDCARE PROVIDER FOCUS GROUP GUIDE

HEALTHY EATING HABITS BASELINE STUDY FOR SNAP

Moderator begins by introducing the concept, process, and purpose of the focus group. She will also lay ground rules for the discussion, explain the purpose of the tape recording equipment, and assure participants that their remarks are confidential in the sense that their names will never be attached to their statements.

***Introduce purpose of group:** The purpose of this group is to discuss information related to the kind of snacks you provide for the children you care for. The group will last about 2 hours. There are no right or wrong answers and your honest answer are very important to our client. (Explain where restrooms are, etc.)*

I. ICEBREAKER

- ◆ Please introduce yourself and tell us a little about the your child care facility, your position, how long have you been in “the business” of child care, a little bit about the children you serve, and the most popular snack you served to your kids last week.

II. GENERAL KNOWLEDGE AND PRACTICES REGARDING SNACKS

- Describe a typical meal and a typical snack time at your center.
Probe: What kind of snacks do you serve now? Why those foods?
- What is the process for deciding what kind of meals and snacks you serve?
Probe: Who makes decisions about meals and snacks? How are these kinds of decisions made at your center?
- How do the children’s attitudes influence what you serve?
- How do the cultural norms of the families you serve influence the kinds of foods served at your center?
- Is there anything you would like to change about the meals and snacks you serve if you had the opportunity?

III. AWARENESS AND PERCEPTIONS OF THE HEALTHY SNACK INITIATIVE

- Who has heard of the Healthy Snack Initiative? (COUNT)
- When we talk about “healthy snacks,” what comes to mind for you?

Probe: What would be the reason for an initiative like this?

- In your opinion, what is the importance of serving fruits and vegetables to young children?

IV. RESPONSE TO POSSIBLE RULE CHANGES

- Right now you have four categories: milk, grains, meat or meat substitute, and fruits and vegetables and you can choose two of those four for snacks. If the State changed the requirement to say that one of those two choices always has to be a fruit or a vegetable, what would your reaction be?
- **(PHOTOSORT 1)** From the photographs that you have, choose a few pairs of menu items that would be an acceptable snack under the new rules that would be realistic for you to serve in your facility?
- What challenges might you face at your center in serving healthier snacks, like fruits and vegetables or whole grains?
- Research shows that there are some challenges associated with serving more fruits and vegetables. What would you guess those challenges are?
- Some of those include food storage, cost and preparation. Let's talk about each of those areas specifically and list some thoughts. **(GO TO FLIP CHART)**
 - Food storage
 - Cost
 - Preparation
 - Other?
- ◆ Where would you purchase the fruits and vegetable?

Probe: What would you buy? Why?

V. HOW DO WE LEARN AND TEACH NUTRITION?

- What kind of background knowledge or training have you had to guide decisions regarding the food you serve to the children?
Probe: What kind of training would you like?
- What would be your preferred way of receiving educational materials from the Texas Department of Agriculture?
Probe: Website? Email? Snail mail? Other?
- How do you currently educate children about nutrition?

Probe: What topics do you teach? (Food pyramid? Fruits & vegetables? Grains? Etc.)

Probe: What kind of activities do you do? Have you recently received, *The Adventures of Zobe*y materials from the Texas Department of Agriculture? (These materials include a DVD, a magnet and a children's book.)

Probe: If so, how have you used these materials with the children you serve? Do you plan to use the materials? Would you like more materials like the Zobe

y materials?

Probe: What specific topics would you like materials for to help educate children about nutrition? What formats would work well for you (children's books or DVDs? Handouts, coloring books with pictures of healthy foods)?

Probe: What kinds of partnerships do you have in the community with other groups with an interest in nutrition, for example, like WIC?

- How do you currently educate parents about nutrition?

Probe: What would parents need to know to “buy in” to these kinds of changes?

VI. CONCLUSIONS

- If you could offer any advice or final thoughts to the people at the Texas Department of Agriculture about the change in the rules about fruits and vegetables, what would you say?

Thank you for your time?

FOCUS GROUP GUIDE FOR Parents

Health Eating Habits Baseline Study for SNAP

I. Introductions

Moderator begins by introducing the concept, process, and purpose of the focus group. She will also lay ground rules for the discussion, explain the purpose of the tape recording equipment, and assure participants that their remarks are confidential in the sense their names will never be used.

- ◆ (Round robin style) Please introduce yourself, tell us how many children you have and their ages. Then tell us a little about yourself like if you work outside the home or go to school. Finally, please complete the following statement: The biggest problem I face when planning meals for my family is _____.

II. General Shopping & Food Preparation

- ◆ Please write down three typical meals you have served your family in the past week.

After everyone writes them down- begin conversation to share and to move into next question.

- ◆ How do you decide what to feed your family on an average day?
 - **Probe:** How do you plan meals? Do you plan your meals ahead of time?
- ◆ How did you learn to feed your family?
 - **Probe:** What did you learn from your family (mother, father, aunts, grandmothers, etc.)?
 - What about from organizations like WIC or from the school meals your children receive?
 - **Probe:** How do you learn new recipes? (Trade with friends? Magazines? Cookbooks? Television show? Etc.)
- ◆ How do the tastes of your children influence what you prepare?
- ◆ How do you think school meals influence your children's eating habits?
- ◆ Do your children help you plan your meals – do they help you shop?

III. Perceptions of “Healthy Foods”

- ◆ What are the healthiest foods you think you prepare for your family? (Moderator list on flip chart in categories: Fruits, Vegetables, Whole Grains, Other)
- ◆ What about milk what kind of milk, does your family drink milk? Probe: what about low fat milk? (For people drinking low fat milk ask if they made a switch and how).
- ◆ There has been a lot in the news lately about whole grains? What are whole grains? Do you feed your family whole grains? Why are whole grains important? (If needed some examples of whole grains include brown rice, whole wheat pasta, oatmeal, whole grain bread.)

Show two loaves of bread one that is 100% whole wheat and one that is whole wheat but not 100%. Ask participants which is the better bread.

- ◆ What do you think are the greatest benefits of feeding our families fruits, vegetables, and whole grains?

Probe: How do your kids respond to “healthy foods?”

III. Challenges to Serving Fruits, Vegetables & Whole Grains

- ◆ What, if any, are the challenges to including healthy foods in your family meals and snack? (Moderator lists “Challenges” on flip chart)
 - Probe: How does cost affect your purchases of fruits, vegetables or whole grains?
 - What about the taste, how does taste affect how much you eat fruits, vegetables, and whole grains?
 - Where do you usually purchase your fruits and vegetables? How often do you buy canned vegetables? What about frozen vegetables?
- ◆ What problems do you face, if any, when it comes to preparing or storing fresh fruits and vegetables?
 - How fresh is the produce at your store?
 - Probe: Which do you find easiest to prepare, canned, frozen or fresh?
 - Probe: How do your children learn about the nutritional value of food?
- ◆ Lately there has been a lot of talk in the news about the value of purchasing vegetables grown close to home. What are your thoughts about that idea? Does your store mark Texas grown produce?

- ◆ How many of you have a farmers market in your community? (Hand count). How many of you have been to the farmers market? (Hand count) How often do you shop at local farmer's market? How does shopping at a farmers market influence how much your family eats fruits and vegetable?

- ◆ How many of you have received vouchers from WIC to shop at a farmers market? How has this influenced your purchases of fresh fruits or vegetables?

- ◆ If you heard tomorrow that they were going to build a new super grocery store around the corner from you and that a new farmers market was opening up close by also, where do you think you would buy your fruits and vegetables. Why?

- ◆ What would make it easier for you to include more fruits, vegetables and whole grains in the meals you prepare for your family?

- ◆ Also in the news lately, there have been many reports about the terrible health problems caused by childhood obesity. What concerns do you have about your own children and their nutritional habits and physical activity habits?

- ◆ How confident do you feel about your children's safety when they play outside in your neighborhood?
 - **Probe:** If not safe, probe: what kinds of things do you do to get your kids out to play and exercise?
 - **Probe:** On a separate but related topic what do you think are the greatest benefits to your child eating a school meal?

V. Field Test of Materials

Champions for Change

Website

Moderator hands out copies of the Champions for Change home page and examples of Champion moms

- ◆ How likely are you to go to a website that offered this kind of information? (Moderator takes hand count of how many think they would go to a website of this type.)
- ◆ What is your initial impression of the website? What do you like or dislike?
- ◆ What other features would you like to see on a website of this type?
- ◆ How many would prefer to get a weekly email with nutrition information that also had a link to the website?

TVADS

Moderator shows both the TV ads from Champions for Change back to back.

- ◆ What is your top of mind reactions to these TV ads?
- ◆ Does the ad make you want to do such and such ie eat more fruits and vegetables, go to the site, turn off the TV.
- ◆ What do you like or dislike about them?
- ◆ How catchy are they? (how likely is it to get your attention?)

Let's Cook with Fruits and Vegetables

Moderator hands out the book *Let's Cook with Fruits and Vegetables*.

- ◆ Off the top of your mind, what is your reaction to this book?
- ◆ Earlier we talked about whether or not we used cookbooks. What are your thoughts about having a book like this?

Moderator passes out *Zobey book and DVD* and asks participants to flip through it as the moderator briefly describes what the book is about.

- -How helpful is receiving books like this from WIC. or your child's school? Do you think your child would watch it?

VI. Conclusions

Moderator begins conclusion by saying the following: Our clients are a group of people who help oversee programs sponsored by the United States Department of Agriculture, like Food Stamps, WIC, Children and Adult Nutrition Programs for child care centers and adult care centers, and so forth. They are very interested in promoting better health for Texans by promoting the idea that we all need to consume more fruits and vegetables.

- ◆ What would you like for them to know about the best ways to encourage or motivate or persuade you to offer more fruits, vegetables and whole grains at school and at home? ?

- ◆ If you could ask them any question in the world, what would you want to ask?

- ◆ In conclusion, what is the biggest thing that will help motivate you or your children to consume healthy foods at home And at school?

Thank you for your time!

AGRILIFE EXTENSION AGENT INTERVIEW GUIDE

Interviewer begins with a description of the project. Including the following:

*We are interested in learning how the target population, **those with an income that is 185% of the FPL or less**, think about fruits and vegetables, as well as learning about their practices around eating fruits and vegetables. **This population includes individuals who participate in WIC, receive food stamps, or whose children receive free or reduced meals at school.** I'd like to ask you some questions about the work that you may have done in your area.*

- May I please have your complete contact information and your title?
- How long have you **been a County Extension Agent**?
- Will you please tell me about the **county** you serve and what the population there is like?

Probe: What % of residents live in poverty? What is the racial/ethnic make-up of the county?

- What type of fruit and vegetable education programs do you provide to low-income populations?
- In addition to programs offered by AgriLIFE Extension, what other fruit and vegetable education programs are available to low-income audiences in your county?
- Based on your experience, what (if any) challenges have you faced in implementing fruits and vegetable education programs to low-income populations?
- In your opinion, is fruit and vegetable education a priority for this population?

Probe: Do they have other needs that you see as more pressing? If so, what are those needs?

- In your experience, what works the best in terms of educating this population on how to eat more fruits and vegetable?
- What have you learned about the barriers **low-income populations** face when it comes to eating more fruits and vegetables?
- What do you see as the **greatest need surrounding fruits and vegetable education** for this population?

Probe: Have you addressed this concern in any of your training? Do you know of anyone who has? What were the results/ findings from that training?

- What programs do you partner with in your area?

Probe: Do you partner with the WIC program in your area? How do you partner with them?

(if yes, see questions below)

- How often do you work with WIC participants?
- Have you heard that WIC is planning to make changes to the WIC food package? If so, what have you heard?

WIC is planning to make changes to the WIC food package next year. The new WIC food package will include fruits and vegetables, and whole grains options such as brown rice, whole wheat bread, oatmeal and corn tortillas. Participants over age 2 will only be able to receive low fat milk (2% or less). In order to receive these additional options participants will receive less milk, cheese, juice and eggs.

- Which of these changes do you think will be the most difficult for WIC participants to make?
- How would you suggest educating participants about that change?

- Have you educated WIC participants on that topic in the past? What works well with the population?
- Do you think you will get questions from WIC participants about the changes to the WIC food package?
- What kind of materials or what kind of topics do you need materials on in order to help WIC participants with their questions or in making these dietary changes?

FOOD BANK DIRECTOR INTERVIEW GUIDE

Name:

Food Bank:

Position:

1. How many people does your food bank serve?
2. To how many areas does your food bank distribute?
3. What barriers does the food bank face in terms of receiving fruit and vegetable donations?
 - a. In terms of distributing fruits and vegetables?
4. Does your food bank distribute locally-grown produce?
5. What barriers does the food bank face in terms of receiving (and distributing) locally-grown f/v donations?
6. How do you suggest increasing the amount of fruits and vegetables available in soup kitchens and food pantries?
7. What do you hear from your clients about getting enough fruits and vegetables?
8. What barriers have you noticed in terms of people consuming fruits and vegetables?
9. What do you think would enable your clients to eat more fruits and vegetables?
10. What, if any, nutritional campaigns, at the local, state, or national level, do you feel have been effective?

11. What types of nutrition-focused classes does your food bank offer?
12. Do you have classes that include information on offering more fruits and vegetables?
13. Do any of your nutrition-focused classes include information on locally-grown fruits and vegetables?
14. Do any of your nutrition classes include information on gardening?
 - a. How often are they offered?
 - b. Where are they offered?
 - c. How many people usually attend?
 - d. What are the demographics of the people who attend (e.g. age, gender, ethnicity)?
 - e. Where are the classes held?
 - f. What types of incentives are offered for attending classes?
15. How are the classes usually received?
 - a. Which are most/least popular?
 - b. Which have been most/least effective?
16. What programs do you partner with in your area?
17. Do you partner with the WIC program in your area? How do you partner with them?

18. When you talk to San Antonio Food bank –I already have this info –we spoke with them as part of a partner focus group with Burson Marsteller.

(if yes, see questions below)

- a) How often do you work with WIC participants?
- b) Have you heard that WIC is planning to make changes to the WIC food package? If so, what have you heard?

WIC is planning to make changes to the WIC food package next year. The new WIC food package will include fruits and vegetables, and whole grains options such as brown rice, whole wheat bread, oatmeal and corn tortillas. Participants over age 2 will only be able to receive low fat milk (2% or less). In order to receive these additional options participants will receive less milk, cheese, juice and eggs. (I am attaching a handout in case you need it.)

19. Which of these changes do you think will be the most difficult for WIC participants to make?
20. How would you suggest educating participants about that change?
21. Have you educated WIC participants on that topic in the past? What works well with the population?
22. Do you think you will get questions from WIC participants about the changes to the WIC food package?
23. What kind of materials or what kind of topics do you need materials on in order to help WIC participants with their questions or in making these dietary changes?
24. Do you have access to the internet?

WIC NUTRITIONAL AND REGIONAL NUTRITIONIST INTERVIEW GUIDE

Interviewer begins with a description of the project. Including the following:

*We are interested in learning how the target population, **those with an income that is 185% of the FPL or less**, think about fruits and vegetables, as well as learning about their practices around eating fruits and vegetables. **This population includes individuals who participate in WIC, receive food stamps, or whose children receive free or reduced meals at school.** I'd like to ask you some questions about the work that you may have done in your area.*

- May I please have your complete contact information and your title?
- How long have you been a WIC Nutrition Educator or a Regional Nutritionist?

For Regional Nutritionist Only

- Will you please tell me about a day in the life of a Regional Nutritionist?

Probe: Who are the typical clients that you interact with on any given day?

For WIC Nutrition Educator Only

- How many clients do you serve?
- What changes have you noticed in your clients' level of knowledge about nutrition in the past 5 years?

CONTINUE TO BOTH

- What type of education do you provide about preparation and consumption of fruits and vegetables?
- In addition to programs you offer, what other fruit and vegetable education programs are available to low-income audiences in your service area?
- Based on your experience, what (if any) challenges have you faced in implementing fruits and vegetable education programs to low-income populations?
- In your opinion, how highly does this audience prioritize or value fruit and vegetable education?

Probe: What other needs do they have that may be more pressing?

- In your experience, what works the best in terms of educating this population on how to eat or prepare more fruits and vegetable?
- What have you learned about the barriers **low-income populations** face when it comes to purchasing, preparing or eating more fruits and vegetables?
- What do you see as the **greatest need for improving fruits and vegetable education** for this population?

Probe: How have you tried to address these concerns in any of your trainings? Who else do you know who has tried to address these concerns? What were the results/ findings from that training?

As you know, WIC is planning to make changes to the WIC food package next year. The new WIC food package will include fruits and vegetables, and whole grains options such as brown rice, whole wheat bread, oatmeal and corn tortillas. Participants over age 2 will only be able to receive low fat milk (2% or less). In order to receive these additional options participants will receive less milk, cheese, juice and eggs.

- Which of these changes do you think will be the most difficult for WIC participants to make?
- How would you suggest educating participants about that change?
- How have you educated WIC participants on that topic in the past? What do you think works well with the population to address food package changes?
- What questions do you anticipate from WIC participants about the changes to the WIC food package?
- What kind of materials or what kind of topics do you need materials on in order to help WIC participants with their questions or in making these dietary changes?
- Last word: